

Fact Sheet:

Division of Developmental Disabilities Waiver Plan

This **Fact Sheet** provides an overview of the Division of Developmental Disabilities' CMS Waivers

Background and Status of Previous Waiver (CAP)

The Centers for Medicare and Medicaid Services (CMS) 2002 review of the Division's Community Alternatives Program (CAP) waiver raised a variety of issues concerning management and operation of the waiver.

Four New Home and Community Based (HCBS) Waivers

To address the issues cited by CMS, the Department now offers services under four targeted waivers – *Basic, Basic Plus, Core* and *Community Protection* - each with specific limits on benefits, services and enrollees. All of the waivers are at capacity enrollment.

Waiver Eligibility

- The individual is a client of DDD.
- The individual has a disability according to criteria established in the Social Security Act.
- The individual's gross income does not exceed 300 percent of the SSI benefit amount, and the individual's resources do not exceed \$2,000. Parental income is not considered for children.
- The individual needs the level of care provided in an Intermediate Care Facility for the Mentally Retarded (ICF/MR).
- A Plan of Care (POC) has been prepared, which shows how the individual's health, safety and habilitation needs will be met in the community.
- The individual has agreed to accept home and community-based services as an alternative to institutional services.

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The individuals on this waiver live with family or in their own homes. **Basic Waiver** They have a strong natural support system. Targeting Criteria The family/caregiver's ability to continue caring for the individual is at risk, but can be continued with the addition of services provided in the Basic Waiver. The individual does not need out-of-home residential services. Individuals on this waiver require a higher level of services than those Basic Plus Waiver in the Basic Waiver and/or they require nursing services. Targeting Criteria The individuals on this waiver live with family or in another setting with assistance and are at high risk of out-of-home placement or loss of current living situation. Individuals may live in an adult family home or adult residential care facility. The individuals on this waiver are at immediate risk of out-of-home Core Waiver placement or are receiving residential habilitation services from a DDD Targeting Criteria contracted residential provider. Individuals on this waiver meet the DDD criteria for "community" Community protection". **Protection Waiver** Targeting Criteria Require 24-hour, on-site staff supervision to ensure the safety of others; and Require therapies and/or other habilitation services; and Agree to receive services from a certified Community Protection Supported Living provider.

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Waiver Services and Yearly Limits

	Services	Yearly Limit
	Behavior Management & Consultation	\$1425 per year on any combination
Basic Waiver	Community Guide	
	Environmental Accessibility	
	Adaptations	
	Specialized Medical	
	Equipment/Supplies	
	Occupational Therapy	
	Specialized Psychiatric Services	
	Physical Therapy	
	Speech, Hearing and Language Services	
	Staff/Family Consultation and	
	Training	
	Transportation	
	Person to Person	May not exceed \$6500 per year
	Supported Employment	
	Community Access	
	Pre-vocational Services	
	Mental Health Stabilization	Limits determined by Mental Health or
	Services:	DDD
	Behavior Management and	
	Consultation	
	Mental health crisis diversion	
	bed services	
	Specialized Psychiatric Services Skilled nursing	
	Personal Care	Limits determined by the CARE assessment
	Respite Care	Limits determined by respite assessment
	Emergency Assistance	\$6000 per year; pre-authorization required

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	Services	Yearly Limit
Basic Plus Waiver	Skilled Nursing and all of the general services in the Basic Waiver	\$6070 per year on any combination
	Person to Person	May not exceed \$9500 per year
	Supported Employment Community Access Pre-vocational Services	In some situations, this limit may be increased to a maximum of \$19,000 based on assessed client need and only with prior authorization.
	Mental Health Stabilization Services:	Limits determined by Mental Health or DDD
	Behavior Management and Consultation	
	Mental health crisis diversion bed services	
	Specialized Psychiatric Services Skilled nursing	
	Personal Care	Limits determined by the CARE assessment
	Respite Care	Limits determined by respite assessment
	Adult Foster Care (Adult Family Home) Adult Residential Care (Boarding Home)	Determined by department rate structure in CARE
	Emergency Assistance	\$6000 per year; pre-authorization required
Core Waiver	Residential Habilitation and all of the Basic Plus services except Emergency Assistance, Adult Family Home and Adult Residential Care services	Limited to the average cost of an ICF/MR for any combination of services necessary to meet assessed client need
Community Protection Waiver	All Core services except Personal Care, Respite, Community Guide, and Community Access. Note: some definitions differ in this waiver.	Limited to the average cost of an ICF/MR for any combination of services necessary to meet assessed client need. Residential services are offered only in DDD Certified Supported Living. Client must agree to Community Protection care plan.

Visit the DDD Internet website at http://www1.dshs.wa.gov/ddd/index.shtml